AND CULTURE (SHRIMATI SUSHILA ROHTAGI): (a) and (b) The Chancellor of Jamia Millia Islamia has appointed Justice V. D. Misra, Retired Chief Justice of Himachal Pradesh, as Enquiry Officer with the following terms of reference:—

(i) To enquire into allegations of mal-administration and matters attracting adverse criticism covering the perioa January 1983 to December 1985; I

(ii) without prejudice to (1), to enquire inio the affairs of the University including matters pertaining to property of the Jamia Millia Islamia; and

(iii) To suggest particular steps to be taken to prevent recurrence of any objectionable incident in future and tn ensure preservation of public confidence.

Ill-effects on inhaling asbestos particles

321. DR. BAPU KALDATE: DR. SHANTI G.'PATEL:

Will fhe Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether GovernmenTs attention has been drawn to a recent statement of the Director of NaTJo'riaT Institute of Occupational Health NIOH) Ahmedabad to the effect that inhalation of asbestos particles caused asbestosis and lung diseases, including lung cancer; and

(b) what steps have been taken to protect workers »n the asbestos cement factories?

THE DEPUTY MINISTER IN THE DEPARTMENT OF FAMILY WELFARE (SHRr S. KRISHNA KUMAR): (a) The Government are aware of the research studies conducted by the National Institute of Occupational Health on the health hazards due to inhalation of asbestos particles. Several studies have been un-dertaken which indicate that asbestos inhalation can lead to lung disease in man. However, there is as yet no conclusive evidence to suggest the possibility of malignancy as a major health hazard.

(b) Asbestosis is a notifiable disease under the Factories Act where preventive measures are being taken by periodic examination of the workers, X-ray of the liing and substitution of other insulants like glass, fibre, plastic foams, etc. A committee has also been appointed by the Director of Technical Development to consider what further preventive measures could be taken.

Mankhurd-Belapur rail

322. MISS SAROJ KHAPARDE: Will the Minister of TRANSPORT be pleased to state:

(a) whether it is a fact that the Cen- , tral Government have taken a dcision to provide rupees IOO crores for the Man khurd-Belapur rail link for the develop ment of New Bombay;

(b) ii so, what are the details of the scheme being implementedby the City Industrial Development Corporation (CIDCO);

(c) whether the railways have finalised a project known as East-West corridor line;

(d) if so, what are the details thereof; and g

(e) by when the whole project is likely to be completed?

THE MINISTER OF STATE IN THE DEPARTMENT OF RAILWAYS (SHRI MADHAVRAO SCINDIA); (a) and (b) The Central Government have accepted the offer of the Maharashtra State Government to bear the cost of execution of formation, track, bridges and electrification for the construction of Mankhurd-Belapur Rail link by raFsing debentures * through the agency of City and Industrial Development Corporation of Maharashtra Government. The cost of fhe balance work of the project would be found by Rail- * ways from their own Plan allocation.

(c) and (d) Railways have carried out a survey for East-West corridor project which consists of three legs namely;

(i) Mankhurd—Belapur

(ii) Bandra—Kurla; and

(iii) Belapur—Panvel.

The corridor from Mankhurd to Belapur covering a distance of 18 Kms willl a bridge across Thane creek has since been sanctioned and is in progress.

(e) The date of completibof the project will depend upon availability cf funds from the Maharashtra State Government & Railways Plan allocation.

LeprOjiy patient* in the country

323. M13S SAROJ KHAPARDE:
SHRI J. P. GOYAL.

Will th* Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what is the number of leprosy patients in the country;

(b) whather the Health Ministry has initiate^ au ambitious leprosy eradication programm© to arrest disease by the year 2000;

(c) if ID, what are the details thereof:

(d) what is the break-up of leprosy patients in each State and Union Teirf-tory;

(e) what is the number of patients v/ho had been brought under treatment till December,, 1985; and

(f) what is the number of new cases which are detected every year?

THE DEPUTY MINISTER IN THE DEPARTMENT OF FAMILY WELFARE (SHRI S. KRISHNA KUMAR); (a) The toumber of leprosy patients in the country is estimated at 4 millions.

(b) ary (c) National Leprosy Eradication Programme is being implemented as IOO per cent Centrally sponsored schemes with the object to arrest the disease by 2000 A.D. Strategies for achieving tlie objective include—

(i) Early detection and regular treatment of cases;

(ii) Creation of infra-structural facilities for treatment;

(iii) Supply of adequate quantities of drugs;

(iv) Adoption of Multi Drug Regimen particularly endemic and~hypcr-ende-mic areas;

(v) Education of patients, their families and community at large on the nature of disease and its curability;

(vi) Economic and social rehabilitation of cured patients td "promote self-reliance.

(d) and (e) Necessary information is given in the attached Statement.

(f) About four lakh cases are expected to be detected annually.

Statement

ANNEXURE

National Leprosy Eradication Programme
(Objective Performance)

Sl. No.	Name of the State/Union Territory	Estimated No. of cases	No. of cases recorded	No. of cases brought under treatment	Report received upto the month
1	2	3	4	5	6
1	Andhra Pradesh	620000	476070	476070	12/85
2	Assam	15000	15408	15080	12/85
3	Bihar	380000	303172	270031	12/85